assistance is likely to exceed Rs. 1.5 lakhs, are to be sent to NIAF from the Health Minister's discretionary grant upto a maximum of Rs. 20,000/-in each case.

In addition to the above, financial assistance is also provided to the poor and needy chronic patients.

Alzheimer disease

*4. SHRI B.J. PANDA:
SHRIKRIPALPARMAR:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether WHO has reported that about 3.5 million people in India suffer from Alzheimer disease;

(b) whether this disease is more sinister than aids and cancer; and

(c) the symptoms of this ailment and the steps taken by Government to control the dreaded disease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) Based on the World Health report, the prevalence of Alzheimer's disease is estimated to be 5% in males and 6% in females above the age of 60 years. Applying this to India's population, it is estimated that there may be around 3.5 million people suffering from Alzheimer's disease. However, this is based on extrapolation and not on actual survey.

Alzheimer disease is a progressive degenerative condition with onset usually after the age of 65 years. Incidence of the disease increases with age, rising to 20% after the age of 85 years. There is no definite treatment and death usually occurs within the five years of initial diagnosis. The exact cause of the disease is not known. It will be, however, incorrect to compare Alzheimer disease with AIDS and Cancer which can affect a person at any age.

The disease results in progressive neurocognitive degeneration, impaired activities of daily living and behaviour/psychiatric symptoms of dementia. The treatment is aimed at relief of symptoms by medication

such as antipsychotics, tranquillisers and c^{u}–' ~.ergic stimulators as well as behavioural modification counseling on caring of people. While no specific awa.cness programmes have been launched for Alzheimer's disease, treatment for Alzheimer's disease is provided in tertiary hospitals both in the Government and private sector.

Sale of spurious drugs in Delhi

*5. SHRI GAYA SINGH:
SHRI J. CHITHARANJAN:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that recently the sale of spurious drugs flourished in Delhi on a large scale;

(b) if so, the details of the raids conducted and spurious drugs confiscated; and

(c) the measures taken to check such a heinous crime?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) As per the feedback available from the Drugs Control Administration, NCT of Delhi, the incidences of manufacture/sale of spurious drugs for the last three years (as on 31.10.2002) are as under:

Year	Total No. of samples taken	Total No. of test reports received	No. of samples found spurious	%of spurious drugs
2000-2001	1127	1126	7	0.6
2001-2002	1442	1277	29	2
2002-2003 as on 31.10.02	1419	563	8	1.3

It will thus appear that the number of samples testing as spurious is not large.

(b) Question does not arise. However, the details of raids carried out during the period 2000-2001,2001 - 2002,2002-2003 (upto 31.10.2002) by